

County: Walworth
 LAKELAND HEALTH CARE CENTER
 W3930 COUNTY ROAD NN

Facility ID: 5080

Page 1

ELKHORN 53121 Phone: (262) 741-3600
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/03): 235
 Total Licensed Bed Capacity (12/31/03): 235
 Number of Residents on 12/31/03: 202

Ownership:
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 227

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		12.9
Supp. Home Care-Personal Care	No					1 - 4 Years		47.5
Supp. Home Care-Household Services	No	Developmental Disabilities	1.0	Under 65	9.9	More Than 4 Years		39.6
Day Services	No	Mental Illness (Org./Psy)	32.7	65 - 74	10.9			----
Respite Care	No	Mental Illness (Other)	2.0	75 - 84	23.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.5	95 & Over	10.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	16.3	65 & Over	90.1	-----		
Transportation	No	Cerebrovascular	13.4		-----	RNs		13.1
Referral Service	No	Diabetes	3.0	Gender	%	LPNs		9.2
Other Services	No	Respiratory	0.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	29.7	Male	25.2	Aides, & Orderlies		
Mentally Ill	No		----	Female	74.8			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	4	2.3	132	0	0.0	0	1	3.7	192	0	0.0	0	0	0.0	5	2.5
Skilled Care	2	100.0	299	166	96.0	113	0	0.0	0	26	96.3	167	0	0.0	0	0	0.0	194	96.0
Intermediate	---	---	---	3	1.7	94	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	3	1.5
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	2	100.0		173	100.0		0	0.0		27	100.0		0	0.0		0	0.0	202	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.4	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.1	Bathing	1.0	45.5	53.5	202
Other Nursing Homes	8.5	Dressing	7.9	53.0	39.1	202
Acute Care Hospitals	74.6	Transferring	24.8	34.2	41.1	202
Psych. Hosp.-MR/DD Facilities	1.7	Toilet Use	16.3	40.6	43.1	202
Rehabilitation Hospitals	0.0	Eating	42.6	33.7	23.8	202
Other Locations	6.8	*****				
Total Number of Admissions	59	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	7.4	Receiving Respiratory Care	8.4	
Private Home/No Home Health	10.5	Occ/Freq. Incontinent of Bladder	71.8	Receiving Tracheostomy Care	0.5	
Private Home/With Home Health	7.0	Occ/Freq. Incontinent of Bowel	46.0	Receiving Suctioning	0.0	
Other Nursing Homes	1.2			Receiving Ostomy Care	3.5	
Acute Care Hospitals	3.5	Mobility		Receiving Tube Feeding	5.9	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.5	Receiving Mechanically Altered Diets	44.1	
Rehabilitation Hospitals	0.0					
Other Locations	8.1	Skin Care		Other Resident Characteristics		
Deaths	69.8	With Pressure Sores	5.0	Have Advance Directives	93.6	
Total Number of Discharges		With Rashes	3.0	Medications		
(Including Deaths)	86			Receiving Psychoactive Drugs	63.9	

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 200+ Peer %	Group Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.8	88.1	1.08	92.9	1.02	88.1	1.08	87.4	1.08
Current Residents from In-County	80.7	55.3	1.46	31.2	2.58	69.7	1.16	76.7	1.05
Admissions from In-County, Still Residing	39.0	26.8	1.46	14.5	2.69	21.4	1.82	19.6	1.98
Admissions/Average Daily Census	26.0	57.4	0.45	40.9	0.64	109.6	0.24	141.3	0.18
Discharges/Average Daily Census	37.9	59.7	0.63	44.5	0.85	111.3	0.34	142.5	0.27
Discharges To Private Residence/Average Daily Census	6.6	17.8	0.37	11.5	0.58	42.9	0.15	61.6	0.11
Residents Receiving Skilled Care	98.5	85.9	1.15	78.1	1.26	92.4	1.07	88.1	1.12
Residents Aged 65 and Older	90.1	88.5	1.02	89.8	1.00	93.1	0.97	87.8	1.03
Title 19 (Medicaid) Funded Residents	85.6	76.4	1.12	78.6	1.09	68.8	1.24	65.9	1.30
Private Pay Funded Residents	13.4	18.1	0.74	19.2	0.70	20.5	0.65	21.0	0.64
Developmentally Disabled Residents	1.0	0.5	1.84	0.5	2.09	0.5	1.98	6.5	0.15
Mentally Ill Residents	34.7	47.1	0.74	37.9	0.91	38.2	0.91	33.6	1.03
General Medical Service Residents	29.7	21.1	1.41	25.3	1.18	21.9	1.36	20.6	1.45
Impaired ADL (Mean)	60.9	44.7	1.36	39.0	1.56	48.0	1.27	49.4	1.23
Psychological Problems	63.9	62.8	1.02	56.9	1.12	54.9	1.16	57.4	1.11
Nursing Care Required (Mean)	8.8	7.8	1.12	7.9	1.11	7.3	1.21	7.3	1.20